



April 2021

BCBSM UPDATING PROVIDER FEES JULY 1, 2021

Beginning with dates of service of July 1, 2021 Blue Cross Blue Shield of Michigan will change the practitioner fees. The change applies to the Traditional, TRUST, and Blue Preferred Plus programs. They will be using the Medicare resource-based relative value scale to determine the new rates. Please go here for more information:

https://www.bcbsm.com/content/dam/microsites/corpcomm/provider/the_record/2021/apr/Record_0421q.shtml

NORTHWOOD INC. IS THE BCBSM DME/POS BENEFIT MANAGER

Effective January 1, 2021, Blue Cross Blue Shield has selected Northwood Inc. as the durable medical equipment manager. Please make sure to follow the appropriate protocol for obtaining authorizations or DME. There is no process to provide exceptions. Patients may find limited options for obtaining their devices. This change also applies to patients who receive their supplies or devices directly from the manufacturers.

Contact Northwood Provider Relations at 1.800.447.9599 with questions.

MICHIGAN STATE MEDICAL SOCIETY HELPS PHYSICIANS COMPLY WITH THE CURES ACT

MMS Legal Counsel created a new resource to help providers' practices comply with the 21st Century Cures Act regarding information blocking. Information blocking takes place in several ways. Doctors can experience blocking when trying to access patient records from other doctors, connecting to EHRs, from one EHR to another. Patients can experience blocking when trying to access their own medical records. In order to access the MSMS webinar and other resources go here:

<https://www.msms.org/About-MSMS/News-Media/new-msms-health-law-update-on-information-blocking-rule>

SUBMITTING CLAIMS PRIOR TO PHYSICIAN ENROLLMENT

Please make sure that you notify PPR of any new providers that you are bringing into your practice. As you know, the physician enrollment process is lengthy and time consuming. Many carriers are extremely behind in processing new applications. It's important to be compliant with carrier rules when seeing patients and making sure you are paid properly. Medicare in particular is asking that you wait until you have the approval letter identifying the allowed effective date before submitting claims for the new provider. Call PPR for details about your practice enrollment status.

And remember, we're here to help you. Don't hesitate to call at any time for any reason.